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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of
Chang (TI-31768)

Serial No. 09/822,753

Filed: March 30, 2001

For: Management of Co-Processor Information by Integrating Non-Program Information
with Program Information

Conf. No. 9031

Group Art Unit: 2182

Examiner: Casiano

CERTIFICATION OF FACSIMILE TRANSMISSION

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Rodney M. Anderson

December 3, 2004
Date

FACSIMILE COVER SHEET

☒ **FACSIMILE COVER SHEET**
☐ NEW APPLICATION
☐ DECLARATION
☐ ASSIGNMENT
☐ FORMAL DRAWINGS
☐ INFORMAL DRAWINGS
☐ CONTINUATION APP'N
☐ DIVISIONAL APP'N

☒ **AMENDMENT (14 Pages)**
☒ **EOT (1 Page)**
☒ **FEE TRANSMITTAL (1 Page)**
☐ APPEAL
☐ ISSUE FEE

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Texas Instruments Incorporated
PO Box 655474, M/S 3999
Dallas, TX 75074

PTO/SB/17 (11-04)

Approved for use through 07/31/2008, OMB 0851-0032

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Effective on 10/01/2004. Patent fees are subject to annual revision.

FEE TRANSMITTAL
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) **110****Complete if Known**

Application Number	09/822,753
Filing Date	March 30, 2001
First Named Inventor	Chang
Examiner Name	Casiano
Art Unit	2182
Attorney Docket No.	TI-31768

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order☒ Deposit Account ☐ None

Deposit Account Number 20-0668
 Deposit Account Name Texas Instruments Incorporated

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FEE CALCULATION**1. BASIC FILING FEE**

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility Filing Fee	790	395	
Design Filing Fee	350	175	
Plant Filing Fee	550	275	
Reissue Filing Fee	790	395	
Provisional Filing Fee	160	80	

Subtotal (1) \$ **0****FEE CALCULATION** (continued)**2. EXTRA CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	X		

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	X		

HP = highest number of independent claims paid for, if greater than 3

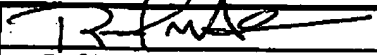
Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

Subtotal (2) \$ **0****3. OTHER FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
1-month extension of time	110	55	110
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure stmt. fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of appeal	340	170	
Request for oral hearing	300	150	

Other:

Subtotal (3) \$ **110****SUBMITTED BY**

Signature		Registration No. 31,939 (Attorney/Agent)	Telephone 972.664.9554
Name (Print/Type)	Rodney M. Anderson	Date	3 Dec 2004

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